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PTO/SB/01 (10-00)

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE to a collection of information unless it contains a vaid OMB control number.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application. I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed. Prior Foreign Foreign Filing Date Priority Certified Copy Application Country (MM/DDYYYY) Not Claimed	Under the Papanwork Re	Eduction ACT of 1993, no parsons a	na tadasted to	respond to a dame.					
POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) Declaration Submitted with Core initial Filing (Surcharge (37 CFR 1.16(e)) required) As a below named inventor, I hereby declare that: My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name Is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: PAIN-SENSITIVE THERAPEUTIC WOUND DRESSINGS (Title of the Invention) The specification of which is attached hereto OR was filed on (MM/DD/YYY) (M4/27/2004) as United States Application Number or PCT International Application Number (PCT/GB2004/001774) and was amended on (MM/DD/YYYY) I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the originand the national or PCT international filing date of the origination which became available between the filing date of the originand the national or PCT international filing date of the original papication (s) for patent or inventor's certificate, or 385(a) of any PCT international application having a filing date before that of the application on which priority is claimed. Prior Foreign Country Foreign Filing Date (MM/DD/YYYY) Pointry Not Claimed) Prior Foreign Application on which	DECLAI	RATION		Attorney Docke	t Number	JJM50	09USPCT		
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PATENT APPLICATION (37 CFR 1.53) Declaration Submitted with Declaration Submitted after initial Filing OR Initial Filing (Surcharge (37 CFR 1.16(e)) required) Filing Date Group Art Unit Examiner Name As a below named inventor, I hereby declare that: My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name Is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: PAIN-SENSITIVE THERAPEUTIC WOUND DRESSINGS (Title of the Invention) The specification of which Saltached hereto Sa			-0.	FUSCINATION III					
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Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached heret	Additional faction	ication numbers are lists	1 2 2 00 be	nolemental priori	v data shee	PTO/S	B/02B attach	ed hereto:	

DECLARATION - Utility or Design Patent Application							
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.							
I hereby daim the benefit under 35 U.S.C. 1	Filing Date (MM/DD/YYYY)	ilication(s) listed colored					
Application Number(s) 60/526,973	12/03/2003	Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.					
I hereby daim the benefit under Title 35, Unit as the subject matter of each of the daims of provided by the first paragraph of Title 35, Undefined in Title 37, Code of Federal Regulationational or PCT international filing date of this Application Serial No.	this application is not disclosed in the prior of the states Code, \$112, I acknowledge the ons, \$1.56(a) which occurred between the fi	duty to disclose material information as					
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States Patent and Trademark Office conn	ected therewith.						
Address all telephone calls to Blossom E. Loo at	telephone number (732) 524-1596.						
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any]) Patrick J. Family Name or Surname Trotter							
Inventor's Patrick Tatte Date 20.10.05							
Residence: City Leeds	State		Count	ry GB	Citizenship GB		
Mailing Address 12 Mill Pond Grove							
City Leeds	State			S6 4RD	Country GB		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
NAME OF SECOND INVENTOR:		etition has	been fi	led for this unsigni	ed inventor		
Given Name (first and middle (if any)) Breda M. Family Name or Surname Cullen							
	lle			Date 2	1/10/05.		
Residence: City Skipton, North Yorkshire	State		Coun	try GB	Citizenship GB		
Malling Address 7 Consort Street							
City Skipton, North Yorkshire	State		ZIP	BD23 1HR	Country GB		

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